

**MULTIPLE DEPENDENT
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

IM

APPLICANT(S)

613016

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	3					
T TAL DEP.	11					
TOTAL CLAIMS	14					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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